

# STATE System Help — Glossary

Behaviors — Cigarette Use.....	2
Behavioral Risk Factor Surveillance System (BRFSS) and Current Population Survey (CPS) Definitions.....	2
Substance Abuse and Mental Health Services Administration (SAMHSA) Synar Legislation Definition .....	2
Youth Risk Behavior Survey (YRBS) Definitions.....	3
Youth Tobacco Survey (YTS) Definitions .....	3
Other Definitions.....	4
Behaviors – Other Tobacco Use .....	6
Current Population Survey (CPS) Definitions .....	6
Youth Risk Behavior Survey (YRBS) Definitions.....	6
Youth Tobacco Survey (YTS) Definitions .....	6
Other Definitions.....	7
Demographics.....	8
Economics .....	9
Funding .....	10
Health Consequences and Costs .....	17
Legislation.....	18

## Behaviors — Cigarette Use

### Behavioral Risk Factor Surveillance System (BRFSS) and Current Population Survey (CPS) Definitions

#### **Current Smoking among Adults\***

Persons who reported ever smoking at least 100 cigarettes and who currently smoke every day or on some days.

Respondents who answered "don't know" or who refused to answer were excluded from the analysis, as were respondents with missing current smoking information.

\*Before 1996, BRFSS respondents were asked, "Have you smoked at least 100 cigarettes in your entire lifetime?" and "Do you smoke cigarettes now?" The BRFSS defines current smokers as persons who reported having ever smoked at least 100 cigarettes during their lifetime and who smoke now.

#### **Every Day Smokers**

Persons who reported ever smoking at least 100 cigarettes and who currently smoke every day.

#### **Former Smokers**

Persons who reported ever smoking at least 100 cigarettes but who do not currently smoke.

#### **Mean Number of Cigarettes**

Among current smokers, the average number of cigarettes smoked per day.

#### **Never Smokers**

Persons who reported having never smoked 100 cigarettes in their lifetime.

#### **Number of Cigarettes per Day**

Among current smokers, the number of cigarettes smoked per day.

#### **Percent of Ever Smokers Who Have Quit**

The percentage of ever smokers who no longer smoke is calculated by dividing the number of former smokers by the number of current and former smokers.

#### **Quit Attempt in Past Year**

Among current smokers, those who quit smoking for one day or more.

#### **Some Day Smokers**

Persons who reported ever smoking at least 100 cigarettes and who currently smoke on some days.

### Substance Abuse and Mental Health Services Administration (SAMHSA) Synar Legislation Definition

#### **Sales Rate**

The percentage rate at which the state is not in compliance with the legislation prohibiting any manufacturer, retailer, or distributor of tobacco products from selling or distributing

such products to any individual under the age of 18. The target rate for sales is 20 percent or below.

**Note:** *Some states have no rate listed because of extraordinary circumstances. The Secretary of the Department of Health and Human Services is given the discretion to find a state or jurisdiction that has had difficulties meeting the compliance requirements of the regulation to be in substantial or material compliance. For example, Rhode Island faced difficult liability issues in 1997 when the New England Convenience Store Owners' Association filed a lawsuit to block the state's enforcement plan. A store clerk also filed a suit as a result of an enforcement check, which resulted in delaying the random inspections required under the Synar regulation. The state survey was also postponed for six months while liability issues were looked into by the Department of Health's legal counsel and the Attorney General's office. Because Rhode Island continued its tobacco control efforts in the midst of these difficulties, the state was considered to be in compliance with extraordinary circumstances.*

### **Youth Risk Behavior Survey (YRBS) Definitions**

#### **Current Cigarette Use**

Students who reported that they had smoked cigarettes on one or more days of the 30 days preceding the survey.

#### **Frequent Cigarette Use**

Students who reported that they had smoked cigarettes on 20 or more of the 30 days preceding the survey.

#### **Percent (%)**

Percentage of surveyed students who reported "current cigarette use" or "frequent cigarette use."

### **Youth Tobacco Survey (YTS) Definitions**

#### **Currently Smoke**

Students who reported that they had smoked cigarettes on one or more days of the 30 days preceding the survey.

#### **Ever Smoked**

Students who reported that they had ever tried smoking cigarettes, even one or two puffs.

#### **Frequently Smoke**

Students who reported that they had smoked cigarettes on 20 or more of the 30 days preceding the survey.

#### **Percent (%)**

Percentage of surveyed students who reported that they "ever smoked," "currently smoke," or "frequently smoke."

#### **Private High School**

Students enrolled in a privately funded high school.

**Note:** *If a state does not have data for private high schools, the table does not include this field.*

**Public High School**

Students enrolled in a public high school (grades 9-12).

**Note:** *If a state does not have data for public high schools, the table does not include this field.*

**Public Middle School**

Students enrolled in a public middle school (grades 6-8).

**Note:** *If a state does not have data for public middle schools, the table does not include this field.*

**Other Definitions**

**African American**

Persons who trace their ancestry of origin to Sub-Saharan Africa.

**American Indian/Alaska Native**

Persons who have origins in any of the original peoples of North America and who maintain that cultural identification through self-identification, tribal affiliation, or community recognition.

**Asian American/Pacific Islander**

Persons who trace their background to the Far East, Southeast Asia, the Indian subcontinent, or the Pacific Islands.

**Hispanic**

Persons who trace their background to one of the Spanish-speaking countries in the Americas or to other Spanish cultures or origins.

**Less than 12 years of Education**

Respondents who reported having either no education, elementary education or some high school education.

**More than 12 years Education**

Respondents who reported having one to three years of college or technical school or a college degree.

**Race and Ethnicity**

Individuals are grouped into one of four race categories or one ethnic group (Hispanic). Hispanic origin is determined first; then, all non-Hispanics are classified by self-reported race.

**Sample Size**

Number of individuals who responded to this question.

**Note:** *"NA" indicates that survey data are not available.*

**White**

Persons who have origins in any of the original peoples of Europe, North Africa, or the Middle East.

**12 years of Education**

Respondents who reported having a GED or high school education.

**95% Confidence Interval**

A range that, with 95% certainty, includes the true population prevalence.

**Note:** "NA" indicates that survey data are not available.

## Behaviors – Other Tobacco Use

### Current Population Survey (CPS) Definitions

#### **Current Cigar/Pipe Smokers**

Persons who have ever smoked cigars or a pipe on a regular basis and who smoke now.

#### **Current Smokeless Tobacco Use**

Persons who have ever used chewing tobacco or snuff on a regular basis and who use them now.

#### **Former Cigar/Pipe Smokers**

Persons who have ever smoked cigars or a pipe on a regular basis but who do not smoke now.

#### **Former Smokeless Tobacco Use**

Persons who have ever used chewing tobacco or snuff on a regular basis but who do not use them now.

#### **Never Cigar/Pipe Smokers**

Persons who have never smoked cigars or a pipe on a regular basis and do not smoke now.

#### **Never Smokeless Tobacco Use**

Persons who have never used chewing tobacco or snuff on a regular basis and who do not use them now.

### Youth Risk Behavior Survey (YRBS) Definitions

#### **Currently Uses Smokeless**

Students who reported that they had used smokeless tobacco on one or more days of the 30 days preceding the survey.

#### **Percent (%)**

Percentage of surveyed students who reported that they currently used smokeless tobacco.

### Youth Tobacco Survey (YTS) Definitions

#### **Currently Uses Smokeless**

Students who reported that they had used smokeless tobacco on one or more days of the 30 days preceding the survey.

#### **Ever Used Smokeless**

Students who responded that they had ever used chewing tobacco, snuff, or dip, such as Redman, Levi Garrett, Beechnut, Skoal, Skoal Bandits, or Copenhagen.

#### **Frequently Uses Smokeless**

Students who reported that they had used smokeless tobacco on 20 or more of the 30 days preceding the survey.

**Percent (%)**

Percentage of surveyed students who reported that they had ever, currently, or frequently used smokeless tobacco.

**Private High School**

Students enrolled in a privately funded high school.

***Note:** If a state does not have data for private high schools, the table does not include this field.*

**Public High School**

Students enrolled in a public high school (grades 9-12).

***Note:** If a state does not have data for public high schools, the table does not include this field.*

**Public Middle School**

Students enrolled in a public middle school (grades 6-8).

***Note:** If a state does not have data for public middle schools, the table does not include this field.*

**Other Definitions****Sample Size**

Number of individuals who responded to this question.

***Note:** "NA" indicates that survey data are not available.*

**95% Confidence Interval**

A range that, with 95% certainty, includes the true population prevalence.

***Note:** "NA" indicates that survey data are not available.*

## **Demographics**

### **Adult**

Persons aged 18 years or older residing in the 50 states and the District of Columbia. These estimates exclude the U.S. Armed Forces overseas and civilian U.S. citizens whose usual place of residence is outside the United States.

### **Resident (Overall)**

Estimates of the U.S. resident population residing in the 50 states and the District of Columbia. These estimates exclude the U.S. Armed Forces overseas and civilian U.S. citizens whose usual place of residence is outside the United States.

### **Youth**

Persons aged less than 18 years residing in the 50 states and the District of Columbia. These estimates exclude civilian U.S. citizens whose usual place of residence is outside the United States.



## Economics

### **Acres Harvested**

The number of acres of tobacco harvested.

**Note:** "\*" No data reported or cash receipts were less than \$500,000.

### **Annual Gross Tax Revenue from Cigarettes (\$)**

The annual gross tax revenue from cigarette sales in dollars.

### **Average Cost per Pack (\$)**

The average cost, in dollars, of one pack of cigarettes.

### **Cash Receipts (\$)**

The amount received from the sale of tobacco (gross value of the crop at auction). States with receipts less than \$1 million were not reported.

**Note:** "\*" No data reported or cash receipts were less than \$500,000.

### **Cigarette Consumption (Pack Sales per Adult)**

The quantity of cigarettes consumed by each adult 18+ in 2002, measured as total tax paid sales divided by the states' adult population 18+ using Census Bureau population numbers.

### **Federal and State Tax as a Percentage of Retail Price (%)**

The amount of federal and state tax, as a percentage of the retail price for each pack of cigarettes.

### **Federal and State Tax Per Pack (\$)**

The amount of federal and state tax combined, in dollars, on each pack of cigarettes.

### **Percentage of Gross State Product (%)**

The percentage of the gross state product (GSP) that is accounted for by the manufacture of harvested tobacco.

### **Production (lb)**

The number of pounds of tobacco harvested.

### **Revenue (\$)**

The income, in dollars, from the manufacture of harvested tobacco (including expenditures for tobacco company administrative offices). States with revenue less than \$1 million are not reported.

### **State Tax Per Pack (\$)**

The amount of state tax on each pack of cigarettes.

## Funding

### Administration and Management (5%)

Coordination, integration, and monitoring of program components. Activities can include

- Awarding and monitoring program contracts and grants.
- Coordinating implementation across program elements.
- Assessing program performance.

Calculation for low estimate:  
5% of low estimates subtotal

Calculation for high estimate:  
5% of high estimates subtotal

### Amount (\$)

Amount, in dollars, of actual funds for the selected state and year.

**Note:** "NA" indicates the amount is not available or not applicable.

### Cessation Programs

Programs aimed at influencing young and adult smokers to stop using tobacco products. Activities can include

- Promoting system changes recommended by the Agency for Health Care Policy Research, such as instituting coverage of treatment for tobacco use under both public and private insurance.
- Providing population-based counseling and treatment programs, such as cessation help-lines.
- Eliminating cost barriers to treatment for underserved populations, particularly the uninsured.

Calculation for low estimate:  
\$1.00 per adult for screening  
+ \$2.00 per smoker for brief counseling

Calculation for high estimate:  
\$1.00 per adult for screening  
+ \$2.00 per smoker for brief counseling  
+ \$13.75 per smoker (50% of program cost for 10% of smokers)  
+ \$27.50 per smoker (~ 25% of smokers covered by state-financed programs)

### Community Programs

Programs at the community level aimed at eliminating nonsmokers' exposure to secondhand smoke, preventing the initiation of tobacco use among young people, promoting quitting among young people and adults, and identifying and eliminating the disparities related to tobacco use and its effects among different population groups.

Activities can include

- Engaging young people to plan and conduct community tobacco prevention and education events and campaigns.
- Working with judges and retailers to develop education and diversion programs.
- Offering smoking cessation programs by drug and alcohol prevention agencies.
- Using tribal newspapers and community presentations by Indian reservation youth to educate the tribal community about tobacco use and the tobacco industry's advertising and promotion on the reservation.

Calculation for low estimate:

\$850,000 for statewide training and infrastructure

+ \$0.70 per capita for local government units and community organizations

Calculation for high estimate:

\$1,200,000 for statewide training and infrastructure

+ \$2.00 per capita for local government units and community organizations

### **Counter-Marketing**

Programs aimed at countering pro-tobacco influences and increasing pro-health messages throughout a state, region, or community. Activities can include

- Advertising through television, radio, billboard, and print media at the state and local level.
- Using media advocacy and other public relations techniques, including such tactics as press releases, local events, and health promotion activities.

Calculation for low estimate:

\$1.00 per capita

Calculation for high estimate:

\$3.00 per capita

### **Enforcement**

Programs aimed at enhancing the enforcement of tobacco control policies, laws, and regulations. Activities can include

- Placing restrictions on minors' access to tobacco products.
- Licensing retailers to deter policy violators.
- Restricting smoking to prevent exposure to environmental tobacco smoke.

Calculations for estimates:

Youth access regulations, enforcement of youth access restrictions, retailer licensure provisions, and other non sales policy areas, such as clean indoor air restrictions:

\$400,000-600,000  
+ \$0.43-0.80 per capita

Interagency coordination and integration of enforcement programs  
\$150,000-300,000

State costs vary depending on the number of retail outlets selling tobacco, the proportion of outlets in rural areas, and the proportion of outlets found to be noncompliant and requiring follow-up visits.

### **Federal — Centers for Disease Control and Prevention — Office on Smoking and Health**

Funds awarded to state health departments from the Centers for Disease Control and Prevention's Office on Smoking and Health as part of the National Tobacco Control Program to help state and territorial health departments reduce the health and economic burden of tobacco use.

### **Federal — Substance Abuse and Mental Health Services Administration (SAMHSA)**

The Substance Abuse Prevention and Treatment (SAPT) Block Grant makes available to the states and U.S. jurisdictions through formula grants \$1.6 billion annually to support the development and delivery of substance abuse prevention and treatment services nationwide. State substance abuse agencies use the prevention portion of the SAPT Block Grant funding to implement programs that have as their focus preventing the use of alcohol, tobacco, and other drugs. States are not required to report how much of their block grant funding is spent on tobacco use prevention, and therefore specific amounts for tobacco control are not available.

### **Funding Cycle**

Range of time that the funding is effective, shown by month and year.

### **Funding Source**

Types of funding organizations, categorized by state or federal/national scope.

### **High Estimate (\$)**

Upper estimated US\$ amount recommended for tobacco control programs in the selected state and year.

### **Low Estimate (\$)**

Lower estimated US\$ amount recommended for tobacco control programs in the selected state and year.

### **Lower Estimate**

Amount or percentage value of the lowest estimate in the range.

### **Non-Government Source — American Legacy Foundation**

Funds from the American Legacy Foundation, an independent national public health foundation in Washington, DC, created by the November 1998 Master Settlement Agreement.

The organization's goals are to reduce youth tobacco use, decrease exposure to secondhand smoke, reduce disparities in access to prevention and cessation services, and increase successful quit rates.

This amount represents the selected state's portion for the selected fiscal year of a three-year, \$35 million, matching grant program to establish and support statewide youth movements against tobacco use.

#### **Non-Government Source — RWJF/AMA**

The RWJF/AMA SmokeLess States National Program Office is currently reviewing proposals from each state and the District of Columbia to allocate up to \$52 million over three years. Approximately \$44 million will be allocated directly to private, nonprofit organizations for policy-focused interventions and approaches as part of the SmokeLess States program. All final awards will be announced in May for a June 2001 start date.

#### **Per Capita Annual Cost**

Amount of tobacco control funds recommended for allocation per person, calculated as follows:

$$\frac{\text{Recommended allocation in the fiscal year}}{\text{-----Divided By-----}} \\ \text{State population as recorded in the latest census}$$

#### **Per Capita Funding**

Amount of tobacco control funds per person, calculated as follows:

$$\frac{\text{Total state funding for tobacco control in the fiscal year}}{\text{-----Divided By-----}} \\ \text{State population as recorded in the latest census}$$

#### **Percentage of CDC Best Practices Recommendation**

A state's tobacco control funds as a percentage of the CDC Best Practices amounts, expressed as a range rounded to the nearest whole numbers, calculated as follows:

$$\frac{\text{Total funding amount for the state's tobacco control program}}{\text{-----Divided By-----}} \\ \text{CDC Best Practices recommendation for total program annual cost}$$

Use the resulting range to compare a state's actual funding with the recommended range.

#### **Program Elements**

Key elements of a comprehensive tobacco control program. These elements work together to produce a synergistic effect characteristic of a successful program.

#### **Recommended Per Capita Funding Level**

Lower and upper recommended average amount of funds to be allocated per person for a state's tobacco control program.

***Note:** Best Practices recommendations are based on 1999 levels, which may be earlier or later than the actual funding year displayed.*

#### **Recommended Total Program Annual Cost**

Lower and upper recommended amount of funds to be allocated for a state's tobacco control program.

***Note:** Best Practices recommendations are based on 1999 levels, which may be earlier or later than the actual funding year displayed.*

### **School Programs**

Programs aimed at preventing the initiation of tobacco use, at eliminating tobacco use and addiction, and at promoting cessation among students. Activities can include

- Implementing the CDC's Guidelines for School Health Programs to Prevent Tobacco Use and Addiction, including tobacco-free policies, evidence-based curricula, teacher training, parental involvement, and cessation services.
- Implementing and incorporating evidence-based curricula identified through the CDC's Research to Classroom Project into a comprehensive school program to prevent tobacco use and addiction.
- Implementing Life Skills Training and Project Towards No Tobacco Use (Project TNT).
- Linking of school-based efforts with local community coalitions and statewide counter-marketing programs.

Calculation for low estimate:

\$500,000 for statewide training and infrastructure  
+ \$4.00 per student for grades K-12

Calculation for high estimate:

\$750,000 for statewide training and infrastructure  
+ \$6.00 per student for grades K-12

### **State Appropriation — Excise Tax Revenue**

State-appropriated funds resulting from an increase in the state's excise tax on tobacco to support statewide tobacco use prevention and control programs. In some cases, states have dedicated a portion of this excise tax revenue to serve as a stable funding stream for state tobacco control programs.

### **State Appropriation — Other**

Any funds appropriated from state resources outside of the settlement or tobacco excise tax with the specific purpose of supporting tobacco use prevention and control activities and programs.

### **State Appropriation — Settlement (Tobacco Only)**

Funds generated by settlements with the tobacco industry to resolve lawsuits by states to recover Medicaid expenditures incurred as a result of tobacco use.

The amount reflects funding specifically appropriated to any governmental agency, foundation, trust fund, board, or university for tobacco control programs for the selected state and fiscal year.

### **State Funding — Other**

Funds from non-appropriated state sources.

The states of Minnesota and Mississippi established a foundation and a partnership, respectively, to support tobacco prevention and control activities through consent decrees

signed as part of individual settlements with the tobacco industry to resolve lawsuits to recover Medicaid expenditures incurred as a result of tobacco use. The budgets of these entities represent a large share of these states' funding for tobacco control programs.

### **Statewide Programs**

Programs at the state level aimed at increasing the capacity of local tobacco control programs. Activities can include

- Providing technical assistance on evaluating programs.
- Promoting media advocacy.
- Developing and implementing smoke-free policies.

Awarding statewide and regional grants to organizations to inform their membership about tobacco control issues and encourage their participation in local efforts.

Calculation for low estimate:  
\$0.40 per capita

Calculation for high estimate:  
\$1.00 per capita

### **Subtotal: Federal/National Sources**

Total amount of funds from all federal and national organizations.

### **Subtotal: Program Elements**

Total recommended funding for topic-specific elements of a comprehensive tobacco control program for the selected state and year.

### **Subtotal: State Appropriation**

Total amount of all state-appropriated funds.

### **Surveillance and Evaluation (10%)**

Systems that monitor program progress and impact, and document program accountability for state policy makers and others responsible for fiscal oversight.

Surveillance and evaluation can be used to monitor tobacco-related behaviors, attitudes, and health outcomes at regular intervals. Specifically, surveillance can be used to monitor the achievement of long-term tobacco control program goals.

Evaluation surveys and data collection systems can be used to evaluate individual tobacco control program elements and activities. Program evaluation efforts can complement tobacco-related surveillance systems by linking national, state, and local program efforts to short-term and intermediate outcomes.

Calculation for low estimate:  
10% of low estimates subtotal

Calculation for high estimate:  
10% of high estimates subtotal

**Tobacco-related Disease Programs**

Programs that address the broader context of tobacco-related diseases. Activities can include

- Implementing interventions to alleviate the existing burden of disease from tobacco use.
- Incorporating tobacco prevention and cessation messages into broader public health activities to ensure wider dissemination of tobacco control strategies.
- Reducing risk factors for tobacco-related diseases other than tobacco use to reduce the disease impact of tobacco use, independent of reductions in tobacco use.

Calculations for estimates:

Tobacco-related cardiovascular disease:

\$500,000 to establish core-capacity functions targeting  
+ \$1 -1.5 million to develop a comprehensive program

Asthma prevention pilot programs:

\$200,000-300,000 for state infrastructure, training, and capacity-building activities  
+ \$600,000-800,000 for support as local initiatives are developed

Oral disease consequences of tobacco use:

\$400,000-750,000 depending on state population

Expansion of cancer registries:

\$75,000-300,000 depending on state population

**Total Funding**

Total amount of actual funds allocated for tobacco control programs.

**Upper Estimate**

Amount or percentage value of the highest estimate in the range.



## **Health Consequences and Costs**

### **Smoking-Attributable Costs — Ambulatory**

The annual amount of smoking-attributable costs for ambulatory (e.g., outpatient treatment) medical services.

### **Smoking-Attributable Costs — Drug**

The annual amount of smoking-attributable costs for prescription drugs.

### **Smoking-Attributable Costs — Hospital**

The annual amount of smoking-attributable costs for hospital services.

### **Smoking-Attributable Costs — Nursing Home**

The annual amount of smoking-attributable costs for nursing home services.

### **Smoking-Attributable Costs — Other**

The annual amount of smoking-attributable costs for home-health services and durable medical equipment.

### **Smoking-Attributable Mortality**

The number of smoking-related deaths. The SAM estimates are currently presented for 1999 and an annual average over the period of 1990–1994.

### **Smoking-Attributable Mortality Rate**

The death rate per 100,000 persons from smoking-related causes. Mortality rates from smoking were calculated for persons aged 35 years and older and were age-adjusted to the 1990 U.S. population. The SAM estimates are currently presented for 1999 and an annual average over the period of 1990–1994.

### **Years of Potential Life Lost**

The years of life lost as the result of premature death from cigarette smoking. Mortality rates from smoking were calculated for persons aged 35 years and older and were age-adjusted to the 1990 U.S. population. The YPLL estimates are currently presented for 1999 and an annual average over the period of 1990–1994.

### **Years of Potential Life Lost per Death**

The years of potential life lost per 100,000 persons as the result of premature death from cigarette smoking divided by the number of smoking-related deaths (smoking-attributable mortality). The YPLL estimates are currently presented for 1999 and an annual average over the period of 1990–1994.

### **Years of Potential Life Lost Rate**

The rate of years of potential life lost per 100,000 persons as the result of premature death from cigarette smoking. Mortality rates from smoking were calculated for persons aged 35 years and older and were age-adjusted to the 1990 U.S. population. The YPLL estimates are currently presented for 1999 and an annual average over the period of 1990–1994.

# Legislation

## Citation

Standard form of referencing a law. Once a bill has been approved, the law is then codified in the state statutes (state code). The citation is the location of that law in the state statutes. Most law libraries, including the Library of Congress, house the bound statutes for all the states. Current and historical state statutes are also available through various online legal research database services. In addition to the provisions of the law, the state statute will list the legislative history of that bill (to be found in the state sessions laws) and may also show the enacted date of the bill. This citation is entered in to the STATE System using The Bluebook: A Uniform System of Citation (<http://www.legalbluebook.com/>)\* (Harvard Law Review, 1996) as a standard format.

\*Links to non-federal organizations found at this site are provided solely as a service to our users. These links do not constitute an endorsement of private products or services by CDC or the Federal Government. The CDC is not responsible for the content of the individual organization Web pages found at these links.

## Commercial Day Care Centers

A facility that is not within a private home, used to provide care for children for a period of time during the day.

## Effective Date

The effective date to the month, day, and year the legislation takes effect in reference to the specific provision of the law. Most effective dates occur after the bill's enactment; however, in some cases, the effective date is retroactive, occurring before the bill becomes law.

## Enacted Date

The enacted date refers to the month, day, and year this specific provision became law. The legislation can be enacted in one of two ways: the legislature approves the bill and the governor signs it into law; or, the legislature approves the bill, the governor vetoes it, and the legislature overrides the veto. In some cases, the legislature's approval is sufficient to make the bill a law. (e.g., the bill becomes law without the governor's signature).

## Enforcement Authority

**Yes:** A provision in the legislation states that some type of entity has been designated to enforce the provisions. This can be a department, agency, office, governing body or any other entity.

**No:** The legislation does not state that an agency, department, office, governing body, or some other entity has been designated to enforce the provisions of the legislation.

## Enforcement Authority (type)

The enforcement authority as stated in the legislation.

**Not Applicable:** The legislation does not state that an agency, department, office, governing body, or some other entity has been designated to enforce the provisions of the legislation.

## Executive Order

**Yes:** The governor issued an executive order to establish the restrictions.

**No:** The governor has not issued an Executive Order to establish smoking restrictions.

**Government Worksites**

Government worksites are work areas that are owned, leased, or operated by the state.

**Home-based Day Care Centers**

A facility used to provide care, within a private residence, for children for a period of time during the day.

**License Suspension and/or Revocation\***

The provision states that a violation of the provisions of the legislation may result in the suspension and/or revocation of the business license for retail sale of tobacco products.

- **Suspension:** A provision in the legislation states that a violation of the legislation may result in the business having its license suspended for a specified period of time but not revoked.
- **Revocation:** A provision in the legislation states that a violation of the legislation may result in the business having its license revoked but not suspended.
- **Both:** A provision in the legislation clearly states that a violation of the legislation may result in the business having its license suspended and revoked.
- **None:** No provision in the legislation stating a violation will result in suspension or revocation of the business license.

**Local Government Covered**

**Yes:** A provision in the legislation clearly states that worksites under the control of political subdivision of the state (e.g. mayor's office) are covered by the state legislation.

**No:** The legislation clearly does not state that worksites under the control of political subdivisions of the state are covered by the legislation; or, the legislation contains no language relating to local government coverage.

**Minimum age in years**

The minimum age in years that an individual must reach before the retailer can legally sell cigarettes and/or other tobacco products to him/her.

**Minimum Number of Employees**

**Yes:** A provision in the legislation clearly specifies that the restriction on smoking in the worksite is only

effective for businesses with more than a specified number of employees.

**No:** The legislation does not specify a minimum number of employees required for the smoking restriction to be effective.

**Minimum Number Required**

The actual number of employees required for the policy to be in effect.

**Minimum Seating Capacity**

**Yes:** A provision in the legislation clearly specifies that the restriction on smoking applies only to restaurants with a specified minimum seating capacity.

**No:** The legislation does not specify a minimum seating capacity for the legislation to be in effect.

**Minimum Seating Capacity Number**

The actual number of seating necessary for the policy to be in effect.

**New**

This column displays legislation that has been enacted but will not be effective until a later date.

**Non-Retaliation Provision**

**Yes:** A provision in the legislation that states an employee may not be subject to retaliation for enforcing or attempting to enforce the provisions of the legislation.

**No:** The legislation does not state that an employee is protected from retaliation for enforcing or attempting to enforce the provisions of the legislation.

**Penalty (min/max)**

A provision in the legislation specifies a monetary fine.

- If the legislation states "at least X amount of dollars," X is the minimum fine and there is no maximum.
- If the legislation states "up to X amount of dollars," zero is the minimum fine and X is the maximum fine.
- If the legislation states an exact fine (and not part of a range), that dollar amount is both the minimum and maximum fine.
- If the legislation states a range of fines, the lowest stated fine is the minimum and the highest stated fine is the maximum.

**Penalty to Business**

**Yes:** A provision in the legislation that establishes and lists the fines, imprisonment or other penalties to a business that will result from a first violation of the legislation.

**No:** The legislation does not establish or list the fines, imprisonment, or other penalties to a business that will result from a first violation of the legislation; or, there may be a penalty listed elsewhere in the state code that applies to this specific provision but has not been identified.

**Penalty to Business (Type) \***

The type of penalty to be incurred by the business for the first violation of the provision of the legislation. Types of penalties include misdemeanors, fines, petty offenses, infractions, etc.

\*If there is no penalty to business then this field will be blank, meaning the legislation does not establish and/or list the fines, imprisonment, or other penalties to a business within the indoor air commercial child day care, government worksite, home-based child day care, private worksite or restaurant legislation.

**Penalty to Smoker**

**Yes:** A provision in the legislation clearly establishes and lists the fines, imprisonment, or other penalties to a smoker for a violation of the legislation.

**No:** The legislation does not establish or list the fines, imprisonment or other penalties to the smoker that will result from a violation of the legislation.

**Percent Smokefree Seating**

The percentage of seats that must be designated as nonsmoking.

**Preemption**

**Yes:** A provision in the legislation that prevents local jurisdictions from enacting more stringent restrictions or restrictions that varies from the state law.

**No:** The legislation clearly states, with anti-preemptive language that it does not prevent local jurisdictions from enacting more stringent restrictions than the state legislation, or restrictions that vary from the state legislation OR contains no language referring to preemption.

**Private Worksites**

Private worksites are places of work other than a building leased, owned, or operated by the state.

**Restaurants**

Restaurants are establishments that serve food for consumption on the premises.

**Restriction in effect at all times**

**Yes:** The restriction is always in effect, regardless of whether or not children are present.

**No:** The legislation clearly states a time period when the restriction is not in effect (i.e. when children are present).

**Restriction in effect only during business hours**

**Yes:** The legislation clearly states a time period when the restriction is in effect (i.e. during business hours, when children are present).

**No:** The restriction is always in effect, regardless of whether or not children are present.

**Signage Required**

**Yes:** A provision in the legislation clearly requires the posting of signs on the premises describing the provisions of the legislation.

**No:** The legislation does not require the posting of signs describing the provisions of the legislation or contains no language pertaining to signage.

**Type of Restrictions**

Indoor air restrictions on smoking range from least restrictive to most restrictive:

- **None:** There is no provision in the legislation that clearly requires any type of restriction on smoking for the specified site or a provision in the legislation clearly states that a specific site may be designated as a smoking area in its entirety.
- **Designated areas:** The legislation clearly requires designated smoking areas for the specified site.
- **Separate ventilated areas:** The legislation clearly requires that smoking areas must have separate ventilation for the specified site.
- **Banned:** The legislation clearly states that no smoking is allowed in the specified site.

**Written Policy Required**

**Yes:** A provision in the legislation clearly requires that the employer establish and circulate written policies describing the provisions of the legislation

**No:** The legislation does not require written policies that outline the provisions of the legislation.